



Center for Behavioral Health Studies

Adolescent Mental Health Problems in Addictions Treatment



Adolescent substance abuse patients with co-occurring disorders have greater potential to relapse following treatment. According to Mona L. Sumner, Clinical Director of Rimrock Foundation, "treatment programs must do a better job of identifying psychiatric disorders among substance abusing teens in order to improve treatment outcomes".

Treatment Variables

The National Institute on Drug Abuse (NIDA) researchers followed 182 adolescents for a year after substance abuse treatment. They found that those teens with psychiatric disorders had slower rates of recovery than those without a co-occurring diagnosis.



Youths with externalizing and internalizing disorders who had evidenced symptoms of anxiety and depression had the least favorable treatment outcomes.

Combinations of symptoms in teens frequently relates to multiple problems in their lives. Often these variables are good predictors of substance abuse treatment outcomes. **Those young people with more severe psychiatric problems often experienced a diminished responsiveness to substance abuse treatment.**

Research Outline

All the youths in the study had been referred to substance abuse treatment. Almost 85 percent of the youth came from the Juvenile Justice or Child Service Systems and ranged in age from 12 to 17 at the beginning of the study.

Participants received cognitive behavioral therapy (CBT) or Multidimensional Family Therapy (MDFT) in weekly sessions for an average of 10 weeks.

At the outset of the study, the participants' reports of substance abuse frequency in the past month averaged 12.7 days and by the end of the treatment, drug use had dropped to 2.5 days. The rates and patterns of change, however, varied considerably depending on whether co-existing psychiatric disorders were present.

Poorer treatment outcomes among people with co-occurring psychiatric disorders suggest that therapists must better tailor treatment services for the patient's particular psychiatric condition.

Adapting treatment services for people with co-occurring psychiatric disorders requires treatment programs link specific therapeutic processes with successful outcome measures.

Gender Differences

Most of the study's participants were boys (82 percent). Girls represented in the group had the least favorable treatment outcomes with more than 83% of them displaying psychiatric disorders. This diagnostic pattern is similar to what clinicians are seeing across the country which are more girls with pronounced mental health problems.

"For these teens, family, school, and legal problems will continue unless there is better identification, referral, and treatment of these vulnerable teens," says Ms. Sumner.

By the time girls with substance abuse problems are referred to treatment, they are usually in considerable distress and experiencing severe psychiatric symptoms.

Summary

Troubled youth often experience family conflicts and instability in their relationships. Studies indicate that boys and girls react differently, with more females tending to turn their stress inward.

According to Ms. Sumner, “young women in particular are prone to developing anxiety and depression

which often goes unnoticed by adults”.

Effective components of therapy must be individualized for adolescents with co-occurring mental health problems. Identifying and diagnosing such mechanisms of change will help us ensure better treatment outcomes.

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For information on Rimrock Foundation’s treatment programs, call Barbara Hansen, Admissions Supervisor at 1-800-227-3953 or 1-406-248-3175, or visit our website at www.rimrock.org. For more educational information on co-occurring disorders, contact the Rimrock Foundation Library.